BCPharmaCare Newsletter *December 22, 2008 Edition 08-013*

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FAIR PHARMACARE PLAN – ANNUAL UPDATE

Fair PharmaCare deductibles for 2009

Fair PharmaCare assistance levels for 2009 are based on family net income for 2007. Starting in the 2009 benefit year, families can deduct the amount of any Universal Child Care Benefit received in the applicable tax year.

On January 1, 2009, PharmaNet will be updated to reflect annual deductibles and family maximums for 2009 for all individuals and families registered in the plan. Deductible accumulations will be reset to zero.

Deductible information for patients for 2009

Fair PharmaCare registrants can access information about their deductible and their family maximum in the following ways.

Through the PharmaCare website at www.health.gov.bc.ca/pharme, registrants can:

- use the Fair PharmaCare Calculator to estimate this information, or
- request that a Confirmation of Fair PharmaCare Assistance be mailed to them.

The use of PharmaNet is not intended as a substitute for professional judgment. Information on PharmaNet is not exhaustive and cannot be relied upon as complete. The absence of a warning about a drug or drug combination is not an indication that the drug or drug combination is safe, appropriate or effective in any given patient. Health care professionals should confirm information obtained from PharmaNet, and ensure no additional relevant information exists, before making patient care decisions.

Registrants can also contact Health Insurance BC and provide appropriate identifying information:

- From the Lower Mainland, call **604-683-7151**.
- From the rest of B.C., call toll-free **1-800-663-7100**.

Customer Service Representatives are available Monday to Friday 8 a.m. – 8 p.m., and Saturday 8 a.m. – 4 p.m.

Retroactive reimbursements

PharmaCare reimburses prescription expenses above a family's Fair PharmaCare deductible only if the expenses were incurred after the family registered for the plan. However, all eligible prescription costs count toward a family's Fair PharmaCare deductible.

However, if a family qualified for increased assistance during the year, their new, lower deductible and family maximum is applied to any eligible prescriptions purchased after January 1 of the current year or the date of the family's Fair PharmaCare registration[1], whichever is later.

Families do not have to apply for retroactive reimbursement; it is calculated automatically after year-end. In the spring of 2009, PharmaCare will mail a reimbursement cheque to each qualifying individual or family.

Monthly Deductible Payment Option (MDPO) reminder

PharmaCare is accepting enrolments in the Monthly Deductible Payment Option for 2009. Letters have been sent to those who enrolled for 2008 advising them that enrolment for 2009 is not automatic. If they wish to re-enrol, they must respond as directed in the letter.

The option is designed to assist individuals or families who:

- are registered for Fair PharmaCare,
- do not have private health insurance with a drug benefit plan,
- have a deductible greater than $0, and
- expect their annual prescription costs to meet or exceed their Fair PharmaCare deductible.

Families who enrol in the MDPO pay their Fair PharmaCare deductible in monthly instalments and receive assistance with their eligible prescription costs right away.

For more information, patients can visit the PharmaCare website at www.health.gov.bc.ca/pharme or contact Health Insurance BC.

KEEPING PHARMACY LINES CLEAR

Recently, patients have been phoning the Health Insurance BC PharmaNet Help Desk using the phone numbers reserved for pharmacy use. There have also been instances in which pharmacists have placed a call to the HelpDesk using the pharmacy lines and then handed the phone to a customer. Both these practices increase traffic on the pharmacy phone queues, which compromises service to other pharmacies.

Please do not share the Help Desk pharmacy numbers with patients. Instead, refer patients to the Health Insurance BC public phone lines or the PharmaCare website.

Telephone Numbers for the Public

From Vancouver, call: 604-683-7151

From the rest of B.C., call toll-free: 1-800-663-7100

[1] The date of a family's registration is considered to be the later of the date the family first registered or the date that a spouse was last added or removed from their Fair PharmaCare record.

SPECIAL SERVICES FEES

The number of Special Services fees that PharmaCare paid, monthly, over the past year:

Nov 2008	3,079	Apr 2008	2,656
Oct 2008	3,309	Mar 2008	2,242
Sep 2008	2,972	Feb 2008	2,241
Aug 2008	2,373	Jan 2008	2,393
Jul 2008	2,905	Dec 2007	3,623
Jun 2008	2,689	Nov 2007	3,782
May 2008	2,696	Oct 2007	3,747

BUPRENORPHINE—CLARIFICATION

Please note that buprenorphine is not a PharmaCare benefit. The College of Physicians & Surgeons of BC, however, requires information on the dispensing of prescriptions for this drug. When submitting claims for buprenorphine, please use the appropriate DIN or PIN specified below:

Product	Interaction	DIN / NON-BENEFIT PIN
Buprenorphine HCl 0.4 mg tablet	with no direct interaction with patient	2242962
Buprenorphine HCl 0.4 mg tablet	involving direct interaction with patient	66999994
Buprenorphine HCl 2 mg tablet	with no direct interaction with patient	2242963
Buprenorphine HCl 2 mg tablet	involving direct interaction with patient	66999995
Buprenorphine HCl 8 mg tablet	with no direct interaction with patient	2242964
Buprenorphine HCl 8 mg tablet	involving direct interaction with patient	66999996

LOW COST ALTERNATIVE (LCA) / REFERENCE DRUG PROGRAM (RDP) BOOKLET CHANGES

New Drugs Categorized to LCA and/or RDP

The following newly-approved benefits have been added to existing LCA/RDP categories as eligible benefits for Plans B, C, F, Fair PharmaCare, and, if applicable, Plan G. (For the Plan G formulary, please visit the Special Authority Information page on the PharmaCare website at www.health.gov.bc.ca/pharme.)

DIN	DRUG NAME	RDP	LCA STATUS	SPECIAL AUTHORITY ONLY
2291037	APO-DILTIAZ TZ 120 mg capsule		P	
2291045	APO-DILTIAZ TZ 180 mg capsule		P	
2291053	APO-DILTIAZ TZ 240 mg capsule		P	
2291061	APO-DILTIAZ TZ 300 mg capsule		P	
2291088	APO-DILTIAZ TZ 360 mg capsule		P	
2306239	CITALOPRAM-ODAN 20 mg tablet		F	
2306247	CITALOPRAM-ODAN 40 mg tablet		F	

F – Fully covered P – Partially covered

New Drugs Categorized to LCA and/or RDP, continued

DIN	DRUG NAME	RDP	LCA STATUS	SPECIAL AUTHORITY ONLY
2301148	GEN-RAMIPRIL 1.25 mg capsule		P	
2301156	GEN-RAMIPRIL 2.5 mg capsule		P	
2301164	GEN-RAMIPRIL 5 mg capsule		P	
2301172	GEN-RAMIPRIL 10 mg capsule		P	
2305259	MINT ONDANSETRON 4 mg tablet		P*	Y
2305267	MINT ONDANSETRON 8 mg tablet		P*	Y
2302780	NOVO-MORPHINE SR 60 mg tablet		P	
2302799	NOVO-MORPHINE SR 100 mg tablet		P	
2302802	NOVO-MORPHINE SR 200 mg tablet		F	
2304163	NOVO-CLONIDINE 0.025 mg tablet		P	
2306212	ONDANSETRON-ODAN 4 mg tablet		F*	Y
2306220	ONDANSETRON-ODAN 8 mg tablet		F*	Y
2279428	ONDANSETRON INJECTION USP 2mg/ml preservative free		P*	Y
2279436	ONDANSETRON INJECTION USP 2mg/ml with preservative		P*	Y
2284537	PMS-ASA EC 650 mg tablet		P	
2302616	PMS-DICLOFENAC 25 mg tablet	Y	P	
2302624	PMS-DICLOFENAC 50 mg tablet	Y	P	
2310805	PMS RABEPRAZOLE EC 10 mg tablet		P*	Y
2310813	PMS RABEPRAZOLE EC 20 mg tablet		P*	Y
2310503	RAN RAMIPRIL 1.25 mg tablet		F	
2310511	RAN RAMIPRIL 2.5 mg tablet		F	
2310538	RAN RAMIPRIL 5 mg tablet		F	
2310546	RAN RAMIPRIL 10 mg tablet		F	
2269430	SANDOZ PAROXETINE 20 mg tablet		P	
2269449	SANDOZ PAROXETINE 30 mg tablet		P	
2314177	SANDOZ RABEPRAZOLE EC 10 mg tablet		P*	Y
2314185	SANDOZ RABEPRAZOLE EC 20 mg tablet		P*	Y
2315262	SANDOZ PRAMIPEXOLE 0.25 mg tablet		P*	Y
2315270	SANDOZ PRAMIPEXOLE 0.5 mg tablet		P*	Y
2315289	SANDOZ PRAMIPEXOLE 1 mg tablet		P*	Y
2315297	SANDOZ PRAMIPEXOLE 1.5 mg tablet		P*	Y

F – Fully covered
P – Partially covered
F* – Drug is a full benefit if Special Authority is in place when the prescription is filled.
P* - Drug is a partial benefit if Special Authority is in place when the prescription is filled.

New LCA Categories

The following drugs (including both existing and new PharmaCare benefits) will be included as new LCA Categories on PharmaNet, effective **January 22, 2009.**

NEW CATEGORY (CHEMICAL NAME)	DIN	BRAND NAME	LCA STATUS	PRICE
BRIMONIDINE TARTRATE SOL 0.15%	2301334	APO-BRIMONIDINE P	F	
	2248151	ALPHAGAN P	P	1.7987
CEFOXITIN SODIUM VIAL 1G	2291711	CEFOXITIN INJ USP	F	
	2128187	CEFOXITIN INJ USP	F	
CEFOXITIN SODIUM VIAL 2G	2291738	CEFOXITIN INJ USP	F	
	2128195	CEFOXITIN INJ USP	F	
CYCLOSPORINE SOLUTION 100MG/ML	2150697	NEORAL ORAL SOLUTION	F*	3.9138
	2244324	APO-CYCLOSPORINE ORAL SOLUTION	F*	

F – Fully covered
P – Partially covered
F* – Drug is a full benefit if Special Authority is in place when the prescription is filled
P* – Drug is a partial benefit if Special Authority is in place when the prescription is filled

BENEFITS

The following new products are now eligible PharmaCare benefits for Plans B, C, F, I and, if indicated below, Plan G and/or Plan P.

DIN	DRUG NAME	PLAN G	PLAN P
2284537	PMS-ASA EC 650 mg tablet	N	N

Blood Glucose Test Strips

The following blood glucose monitoring strips are now eligible PharmaCare benefits for patients on Plan C, F, and Fair PharmaCare who have a valid Certificate of Training in blood glucose monitoring.

DIN / PIN	DRUG NAME
44123041	LIFE BRAND PORTABLE blood glucose test strips

NON-BENEFITS

The following products have been reviewed and will not be added as benefits under PharmaCare.

DIN	DRUG NAME
2304546	CIPROFLOXACIN (CIPROFLOXACIN) 2 mg/mL intravenous infusion BP